



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 3:50 pm, Apr 23, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 201274	NAME OF AGENCY Eldon Police Department	DATE OF INSPECTION 04/22/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 111 South Oak, Eldon Mo 65026		TIME OF INSPECTION 8:14 am

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) <u>4-22-2014 8:14 am</u>
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <u>49 °C</u>	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth</u> LOT # <u>13280</u> EXP. DATE <u>10/16/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP ($34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$) <u>34.0</u> °C SIMULATOR SN <u>2999</u> EXP. DATE <u>09/09/2014</u>

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within $\pm 5\%$ of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 <u>.097</u>	TEST 2 <u>.098</u>	TEST 3 <u>.098</u>
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	1	(0-.04)	1	(.05-.09)	2	(.10-.14)	1	(.15-.19)	0	OVER .19	1
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS
(USE OTHER SIDE IF NECESSARY).

None, Just a Maintenance report

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME <u>Carol Day</u>
TYPED PERMIT NUMBER EXPIRATION DATE <u>2014-05-01</u>	TELEPHONE NUMBER <u>573-438-1111</u>

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2975 James Blvd.
St. Louis, MO 63107

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201274
04/22/14

TESTING OFFICER:

KIDWELL, BRIAN/D

OFFICER I.D.# 806

PERMIT NUMBER: 230304

EXPIRATION DATE: 12/11/15

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	08:16
INTERNAL STANDARD	VERIFIED	08:18
EXTERNAL STANDARD	.097	08:19
BLANK TEST	.000	08:19
EXTERNAL STANDARD	.090	08:20
BLANK TEST	.000	08:20
EXTERNAL STANDARD	.093	08:21
BLANK TEST	.000	08:21

R = 0

SIG. = .1

AVE. = 1.0976

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201274
04/22/14

ARREST TIME: 08:00

SUBJECT NAME:

REF: TEST

DATE: 10/10/09 SEX: F

STATE I.D.#: MO/1234567

ARRESTING OFFICER:

KIDWELL, BRIAN/D

OFFICER I.D.# 806

TESTING OFFICER:

KIDWELL, BRIAN/D

OFFICER I.D.# 806

PERMIT NUMBER: 230304

EXPIRATION DATE: 12/11/15

MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	08:24
INTERNAL STANDARD	VERIFIED	08:24
RADIO INTERFERENCE		

BAC DataMaster

Evidence Ticket

Parameter	Value	Unit
Initial Temperature	25.00	°C
Final Temperature	100.00	°C
Heating Rate	10.00	°C/min
Sample Weight	0.1000	g

BAC DataMaster

Evidence Ticket

"0%123456789ABCDEFHJKLMNPQRSTUWXYZ[]_`~{|}~>?@!#\$%^&*+,-./:;<";' " needs tight jf linn
pqrs t uvwxyz34567"